	COTALIC	0: 354 (1)	- A COlum	1)		umn 2) 💞	75°	TYPE		OR	SMAL	ENTI
	FOTAL'E .A	s # lord	480	12				RATE		7	RATE	FE
F	OR	NUMBER	NUMBER FILED		BER EXTRA	Π	BASIC FEE			BASIC FE	XG(
TOTAL CHARGEABLE CLAIMS			⟨ m	(minus 20=		*		X\$ 9=		OR	X\$18=	1
INDEPENDENT CLAIMS			/ m	ninus 3 =	•			X42=		-		-
MULTIPLE DEPENDENT CLAIM PRESENT							1		-	OR		<u> </u>
* If the difference in column 1 is less than zero, enter "0" in column 2								+140=	1	OR	+280=	
· · · · · · · · · · · · · · · · · · ·								TOTAL		OR	TOTAL	890
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITAL		OTHER	
		CLAIMS		. HIGH		(Columh 3)	1 6	SWIALL		OR T 1	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADI TION FE
Š	Total	1. 7	Minus	-2	6	=		X\$ 9=		OR	X\$18=	
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	FIRST PRES		-			OR						
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AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY :	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADE TION FEI
Š	Total	•	Minus	**		=		X\$ 9=		OR	X\$18≐	1
E E	Independent	*	Minus	***		=	╽┟╴	X42=	·.	 	X84=	
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ENTC		CLAMS REMAINING AFTER AMENO		HIGHES NUMBE PREVIOUS PAID FO	F	PPISENT EXTRA		RATE	ADD. TOHAL		RATE	TK:
NON	Total		ا فہ	**	1	= 4	-	X\$:9=		OR	X\$,16≅	3. ,
AMENDMENT	Independent	*	Minus	***		= .	-	X42=	:		X84=	
	FIRST PRESE	NTATION OF ML	LTIPLE DEP	ENDENT C	CLAIM		-			OR	^04= 	
and the perform only minute service than east entry or polumn 2 in the finite service.										^- [*]	- #	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										DR A	OTAL	<u> </u>
1	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											
		-						-				

FORM PTO-875 (Rev. 8/01)

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